## CALFRESH (CF) PROGRAM REQUEST FOR POLICY/REGULATION INTERPRETATION

**INSTRUCTIONS:** Complete items 1 - 10 on the form. Use a separate form for each policy interpretation request. If additional space is needed, please use the second page. Be sure to identify the additional discussion with the appropriate number and heading. Retain a copy of the CF 24 for your records.

 Questions from counties, including county Quality Control, must be submitted by the county CalFresh Coordinator and may be submitted directly to the CalFresh Policy analyst assigned responsibility for the county, with a copy directed to the appropriate CalFresh Policy unit manager.

DAT	FOR CDS E RECEIVED:		RESPONDED TO COUNTY/AL	J:		
	Programme Andrews	E	S. Cone Para			
	If the county is in possession of verification that SSI/SSP has conditions of eligibility are satisfied.	is be	en denied, the househ	nold may be CalFresh if all other		
11.	STATE POLICY RESPONSE (CFPB USE ONLY):	Administration of States and Assessment			-	
10.	1) Yes, per 63-402.226 - The client is not in receipt and ha nonpay status. Regs 63-402.226 No person receiving Supp (SSI/SSP) payments is eligible to receive food stamp benefit SSI/SSP recipients receive as part of their SSI/SSP benefit recipients in California are ineligible to receive food stamps. SSI/SSP benefits to be determined ineligible for the Food State level of SSI/SSP benefits to persons who have been det benefits, receipt of these substitute payments will terminate benefits, the person will remain ineligible for food stamp benefits of nonreceipt or suspension of SSI/SSP payments of	as be oplemits. La ca . A potentiamp termine Foomefits	when applicants are en denied. 2) No, per sental Security Income inder the provisions of amount in lieu of for erson must actually reprogram. If the CWE ned eligible for SSI/S of Stamp Program eliguntil actually termina	e displaying SSI/SSP Nonpay  63-402.226 - The client is in a e/ State Supplementary Program f PL 95-458:5; 1) most California bod stamp benefits; 2) all SSI/SSP aceive, not merely have applied for, b) provides payments at least equal SP awaiting receipt of SSI/SSP ibility. Once receiving SSI/SSP ted from the SSI/SSP Program;	:0	
	spacity for SGA - other work" is the client eligible for CalFresh? When applicants are displaying SSI/SSP Denial Paymen odes in MEDS are clients CalFresh eligible?					
	We have two scenarios that we would like to have clarification.  1) If a applicant comes into apply for CalFresh and MEDS is			aumont status of "NI22" Doniel		
9.	QUESTION: (INCLUDE SCENARIO IF NEEDED FOR CLARITY):					
4.	REGULATION CITE(S): 63-402.226					
3.	PHONE NO.: (530) 225-5733		63-402.226			
2.	REQUESTOR NAME: Sandee Zempel	8.		CL/ACIN, court cases, etc. in references) save a regulation cite(s) and/or a reference(s).	••••	
	Other:	7. SUBJECT: CalFresh - SSI/SSP Payment Status Codes				
	Fair Hearing		Shasta County			
	QC QC	6.	COUNTY/ORGANIZATION:	: 00/01/14		
1.	RESPONSE NEEDED DUE TO:  Policy/Regulation Interpretation	5.	DATE OF REQUEST: 07/19/12	NEED RESPONSE BY: 08/01/12		
(\$	Questions from Administrative Law Judges may be submitted direct where the hearing took place, with a copy of the form directed to the	те ар	propriate CalFresh Bure	alyst assigned responsibility to the cou- au unit manager.	nt	

CALFRESH (CF) PROGRAM REQUEST FOR POLICY/REGULATION INTERPRETATION (Continued)						
	RESPONSE NEEDED DUE TO:  Policy/Regulation Interpretation  GC Fair Hearing Other:	5. 6. 7.	DATE OF REQUEST:  COUNTY/ORGANIZATION:  SUBJECT:	NEED RESPONSE BY:		
2.	REQUESTOR NAME:	8.	B. REFERENCES: (Include ACL/ACIN, court cases, etc. in references) NOTE: All requests must have a regulation cite(s) and/or a reference(s).			
3.	PHONE NO.:					
4.	REGULATION CITE(S):					

OF 24 (7/12)